

JUL 14 2004 OFFICIAL

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Practitioner's Docket No. MPI97-035CP1M  
(703) 872-9306

PATENT

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## Submitted herewith:

Amendment Transmittal (2 pages—in duplicate)

Supplemental Amendment and Response (5 pages)

Total

Pages (10 pages)  
(Including this cover sheet)

TO/SB/97 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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JUL 14 2004

OFFICIAL  
PATENTPractitioner's Docket No. MPI97-035CP1M

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Acton, Susan L., et al.  
Application No.: 09/163,648 Group No.: 1654  
Filed: September 30, 1998 Examiner: GUPTA, ANISH  
For: ANGIOTENSIN CONVERTING ENZYME HOMOLOG AND THERAPEUTIC  
AND DIAGNOSTIC USES THEREFOR

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

## AMENDMENT TRANSMITTAL

1. Transmitted herewith for this application is/are:
  - a. This Amendment Transmittal (2 pages - in duplicate); and
  - b. Supplemental Amendment and Response (5 pages).

## STATUS

2. Applicant is other than a small entity.

## PETITION FOR EXTENSION OF TIME

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(3)) for a \_\_\_\_\_ month extension:

Extension fee due with this request \$0.00

## CERTIFICATION UNDER 37 C.F.R. SECTIONS 1.8(a) and 1.10\*

I hereby certify that, on the date shown below, this correspondence is being:

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37 C.F.R. SECTION 1.8(a)

37 C.F.R. SECTION 1.10\*

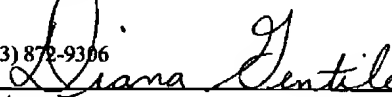
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(Page 1 of 2)

**Practitioner's Docket No. MPI97-035CP1M**

If an additional extension of time is required, please consider this a petition therefor.

**FEE FOR CLAIMS**

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)		(Col. 2)		(Col. 3)	OTHER THAN A SMALL ENTITY		
	Claims Remaining After Amendment		Highest No. Previously Paid For		Present Extra	Rate	Addit. Fee	
Total	0	Minus	0	=	0	\$18.00	=	\$0.00
Indep.	0	Minus	0	=	0	\$86.00	=	\$0.00
First Presentation of Multiple Dependent Claims			0			\$290.00	=	\$0.00
						Total Addit. Fee		\$0.00

Total additional fee for claims required \$0.00

**FEE PAYMENT**

5. Charge Account No. 501668 the sum of \$0.00 (which includes the \$0.00 extension fee and the \$0.00 additional fee for claims). A duplicate of this transmittal is attached.

**FEE DEFICIENCY**

6. If any additional extension and/or fee is required, charge Account No. 501668.  
If any additional fee for claims is required, charge Account No. 501668.
7. Correspondence Address  
Direct all future correspondence to:

Customer Number 30405  
OR  
Intellectual Property Department  
MILLENNIUM PHARMACEUTICALS, INC.  
40 Landsdowne Street  
Cambridge, MA 02139

July 14, 2004

MILLENNIUM PHARMACEUTICALS, INC.

By Kerri Pollard Schray

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

SUPPLEMENTAL AMENDMENT AND RESPONSE

Sir: In response to the Office Communication mailed July 7, 2004, Applicants submit the present Supplemental Amendment and Response containing the entire Amendments to the Claims section of Applicants' response mailed June 24, 2004. This submission reflects change of the status identifiers of the claims solely and contains no new matter. Please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 5 of this paper.

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